## Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name WHITE CASTLE #14  Address 1701 E. SPRING ST, NEW ALBANY IN 47150  Owner WHITE CASTLE SYSTEM INC  Owner's Address 4730 ALLMOND AVE LOUISVILLE, KY 40209  Person in Charge TRACY CROW  Responsible Person's Email CLARKN@WHITECASTLE.COM  Certified Food Handler NICOLE CLARK  DONNA SWIFT					Est Owi	Telephone Number 812-945-7864 a 614-228-5781  PurposeRoutine Yellow-up Complaint Pre-Operational Temporary HACCP Other (list)	Date of Inspection 07/25/2022  Follow Up  Menu Type 1 2 32	Released 08/04/2022
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"								
Section # C NC R Narrative						To Be Corrected		
Summary of Vio			NC .	R		nancoted by (name and title	neintad):	
Received by (name and title printed):					Inspected by (name and title printed): Thomas Snider CFS			
Received by (signature):					I	Inspected by (signature):		
cc:				cc:	-		cc:	